

**LOS ANGELES COUNTY- DEPARTMENT OF MENTAL HEALTH**  
**Service Area II Program Administration**

**Adult Quality Improvement Committee Meeting**  
**Kimber Salvaggio, Adult QIC Chair**

**March 15, 2012**  
**San Fernando Mental Health Center**  
**10:00am-11:30am**

**Agenda**

Introductions & Agency Updates All

Review of Minutes –January 2012\* All

**Quality Improvement**

Cultural Competency Committee ECDA  
PRO/Change of Provider report\* Kimber  
Clinical Issues Kimber  
APS/EQRO\* Kimber

**Quality Assurance**

DMH Announcements Kimber  
Audits Kimber

- EPSDT
- In Patient
- Auditor Controller

State DMH Updates Kimber  
Technical Asst. Kimber

- Medical Lockouts & MHSA
- Inactivation of 99361/99362\*
- NPI Duplicate RP clean up
- PEI CORS Assmt & Tx Plan
- DMH RN DSM Training

**Other Issues**

How will this information be disseminated in your agency All  
Upcoming Agenda Items & Announcements All  
Adjournment Kimber Salvaggio

Handout\*

Next Meeting for Adult QIC: May 17, 2012 at SFMHC 10-11:30am

**LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH  
Service Area II Program Administration  
Quality Improvement Committee Adult**

**Kimber Salvaggio, Chair**

**MINUTES – Thursday, March 15, 2012**

**Present**

Angela Kahn - SFVCMHC, Inc  
Carolyn Heier - JFS  
Denise Greenspan – Hillview  
Dominique Eugene – PACS  
Dora Escalante – JFS  
Hosun Kwon – APCTC  
Jim Randall – DMH O & E  
Keith Star - Tarzana Tx Ctr  
Kimberly Martin – Child & Family Ctr  
La Tina Jackson – DMH – WVMHC  
Leslie DiMascio – SFVCMHC, Inc  
Marc Borkheim – DMH QI Division  
Maria Di Battista - ECDA  
Melanie Coleman – Tarzana Tx Ctr  
Monju Shome - UCCS  
Nahid Naghavi – DMH - Program Review  
Sabrina Barcheski – Santa Clarita Valley MHC  
Takaé Hayashi – Topanga West Guest Home

**Present**

**Other(s)**

**Absent**

Cheryl Driscoll - Hillview  
Donna Dasig – DMH- SFMHC  
Eileen Maronde – West Valley MHC  
James Coomes – DMH – UCSP  
Ken Bachrach - Tarzana Tx Ctr  
Michele Renfrow – DMH  
Michelle Logvinsky – Topanga West  
Michelle Majors – DMH – SCVMHC  
Patrick Kelly – Didi Hirsch  
Sandra Gonzales – El Dorado

SUBJECT	DISCUSSION	ACTION AGREEMENTS/DECISIONS
<b><u>Welcome &amp; Introductions/Announcements</u></b>	<ul style="list-style-type: none"> <li>• Compassion fatigue training available at Child &amp; Family Center- brochure handed out</li> <li>• Seeking safety confirmation was sent out on 3/14/12. Please check to make sure you received confirmation.</li> <li>• CORS training on 3/23 for first timers. Must be a</li> </ul>	

SUBJECT	DISCUSSION	ACTION AGREEMENTS/DECISIONS
<u>Review of Minutes</u>	<ul style="list-style-type: none"> <li>master level or above or nurse practitioner Refresher CORRS training on 4/3</li> <li>Clergy breakfast date to be determined</li> <li>Troubleshooter list will be distributed to all Service Areas.</li> <li>Patient's Rights- Change of Provider Report. Please check this report and if you turning it in but the report shows missing information, please let Kimber know.</li> </ul> <p>January 2012</p>	<p>Send needed changes to Kimber by next week</p> <p>Will be sent via email for corrections &amp; approval</p>
<u>QI PORTION</u>  <u>Cultural Competency Report</u>	<u>QI PORTION</u> <ul style="list-style-type: none"> <li>Completed review of training modules – will not adopt</li> <li>Still reviewing bilingual bonus policy and language interpreters</li> <li>Handouts*</li> <li>CCC held elections for co-chairs – Jim Randall and Lupe Ayala were elected</li> </ul>	<u>QI PORTION</u>
<u>PRO</u>	<ul style="list-style-type: none"> <li>Handout reports*</li> <li>New director – Mary Williams</li> </ul>	



## DISCUSSION

## ACTION

### AGREEMENTS/DECISIONS

- Round of peer review in December – looked at clients on more than 5 rx over a 3 month period – 58 clients met the criteria – out of the 58, 42 orders were outside of parameters – then 27 had appropriate medication review form; 22 had meds listed
  - Indigent clients only – no contractors or NPs
  - peer review completed – small cohort of more than 5 or out of parameters
- Update research policy – what kinds of research and procedures?
- policy levels – 1 internal dmh – 2 dmh contractors should have a similar policy
- new policy - mgmt of aggressive cft bx – physical restraints eliminated – how to evaluate your clinic to respond - look at field services
- physician training in June on managing threats
- looking for feedback on what to study next
- consultation parameters - consultation parameters still being worked on indirect consultation (for HWLA) and direct consultation and e-consultations with county counsel

4/16-19/12 – looking at integration of cod in primary care in mental health

EQRO

4/16-19/12 – looking at integration of cod in primary care in mental health

SUBJECT	DISCUSSION	ACTION AGREEMENTS/DECISIONS
<p><b><u>QA mtg notes</u></b></p> <p><b><u>ANNOUNCEMENTS</u></b></p> <p><b><u>STATE DMH UPDATES</u></b></p>	<p><b><u>QA mtg notes</u></b></p> <ul style="list-style-type: none"> <li>• Moving to 695 15<sup>th</sup> floor end of March</li> <li>• LPCC- is not recognized and is a non-licensed provider; can operate as a MHRS as the highest level</li> </ul>	<p><b><u>QA mtg notes</u></b></p>
<p><b><u>QA Technical Asst.</u></b></p>	<ul style="list-style-type: none"> <li>• Medical lockouts &amp; MHSA Funding; same concept as CGF             <ul style="list-style-type: none"> <li>◦ Unbilled MC report if box is unbilled – use code to override – check with RMD if you have questions</li> </ul> </li> <li>• inactivation of 99361/99362             <ul style="list-style-type: none"> <li>◦ Starting 7/1/12 will not be accepted</li> <li>◦ Use h0032 – focus on developing a plan for client</li> <li>◦ Can be face to face (encourage this practice)</li> <li>◦ Threshold caps still exist – will be counted as h0032 with no face to face</li> <li>◦ Did that consult or team conference meet the plan development criteria</li> <li>◦ Use for cccp's</li> <li>◦ Stand alone - only doing plan development – no therapy or case mgmt</li> </ul> </li> </ul>	

SUBJECT	DISCUSSION	ACTION AGREEMENTS/DECISIONS
<u>QA Technical Asst.- con't</u>	<ul style="list-style-type: none"> <li>○ h0032 ?'s – plan development – what r u doing with that info that impacts the client</li> <li>○ medical pays for plan development not case consultation</li> <li>• 5010 UPDATES</li> <li>• County coalition tx plan update may be available in next 2 months</li> <li>• NP/DUPLICATE RP clean up – fyi – OPS and NPESS must be exactly the same; if there is a discrepancy then depending on which one the provider wants to change will determine if a PFAR is needed; must have the same info on OPS &amp; NPESS (name &amp; taxonomy &amp; discipline &amp; NPI, etc)</li> <li>• PEI CORRS Assessment &amp; Tx Plan               <ul style="list-style-type: none"> <li>○ Short assmt ok</li> <li>○ Need to establish med nec, functional impairment related to MH issues, allergies, &amp; answer “why this EBP”</li> <li>○ If tx runs longer addendum is fine with info on why longer tx is needed</li> <li>○ Initiate tx plan in spite of 60 day policy</li> </ul> </li> <li>• DMH RN's Nursing DSM training – trained RN's – contractors to develop their own standardized procedures &amp; training - cns, MH NP's can dx; DMH will open training to contractors based on space</li> </ul>	



SUBJECT	DISCUSSION	ACTION AGREEMENTS/DECISIONS
<p><b><u>Upcoming Agenda Items</u></b></p>	<ul style="list-style-type: none"> <li>• How is the info in this mtg disseminated to RP's at your agency</li> <li>• Implementation of models</li> <li>• Work groups, training of reports, data</li> </ul>	
<p><b><u>Adjournment</u></b></p>		

Respectfully Submitted by Kimber Salvaggio